




DELTA TOWNSHIP ATHLETIC REGISTRATION FORM - Please use one form per person. Feel free to make copies.

PARTICIPANT'S NAME	HOME PHONE	CHILD'S DOB	M/F
STREET	WORK PHONE	<input type="checkbox"/> MEDICAL CONDITION? (Attach brief explanation)	
CITY, ZIP	PERSON'S NAME AT WORK PHONE		
IF YOU WOULD LIKE TO RECEIVE NOTICES OF UPCOMING EVENTS VIA EMAIL, PLEASE PROVIDE YOUR EMAIL ADDRESS:			

	EVENT NAME	REGISTRATION INFORMATION	COST
<input type="checkbox"/>	2004 BASKETBALL - \$28.00 Deadline: December 19, 2003 Ages 7-10 as of December 1, 2003 	School my child attends: _____ 	
<input type="checkbox"/>	2004 SPRING SOCCER - \$22.00 Deadline: February 27, 2004 Ages 4-10 as of December 1, 2003 	School my child attends: _____ <input type="checkbox"/> Yes, I am willing to coach a team. If yes, name: _____ <input type="checkbox"/> 4 on 4 <input type="checkbox"/> 10 on 10	
<input type="checkbox"/>	2004 BOYS' BASEBALL - \$22.00 Deadline: May 7, 2004 Ages 7-9 as of June 7, 2004 	School my child attends: _____ <input type="checkbox"/> Yes, I am willing to coach a team. If yes, name: _____	
<input type="checkbox"/>	2004 GIRLS' SOFTBALL - \$22.00 Deadline: May 7, 2004 Ages 7-11 as of June 7, 2004 	School my child attends: _____ <input type="checkbox"/> Yes, I am willing to coach a team. If yes, name: _____	
<input type="checkbox"/>	2004 COED T-BALL - \$22.00 Deadline: May 7, 2004 Ages 5-6 as of June 7, 2004 	School my child attends: _____ <input type="checkbox"/> Yes, I am willing to coach a team. If yes, name: _____	

Phone: (517) 323-8555 Internet: parks.deltami.gov Make checks payable to: Delta Township
 Mail to: Delta Township Parks & Recreation, 7710 W. Saginaw Hwy, Lansing 48917
 No special requests will be honored.

<input type="checkbox"/>  Programs with this symbol require a blue & white reversible shirt. If your child needs one, please select a size and enclose an additional \$10.00. XS S M L XL (all sizes are adult) - \$10.00

Parent/Guardian or Adult Participant Waiver, Release of Liability & Consent Agreement

I understand that the Delta Township Parks and Recreation Department and its program co-sponsors thereof, are in no way responsible for any injury that may be incurred by myself or my child while participating in the program(s) I have registered for and agree to hold the above harmless for injury and damages in return for such participation.

Parent/Guardian or Adult Participant Signature _____

Please Print Name _____

TOTAL DATE RCVD RECEIPT # SHIRT RECEIVED?	
	OFFICE USE ONLY
	<input type="checkbox"/> Yes <input type="checkbox"/> No